U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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# FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Grand Control of the	
1. File Number U - 8[9]	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name DANNY GRODOTZKE	Name PLUMBERS LOCAL UNION NO. 200
	Labor Organization File Number 529-417
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 2123 5TH AVENUE	Street 2123 5TH AVENUE
City PONKONKOMA	City
RONKONKOMA	City RONKONKOMA
State New York ZIP Code + 4 11779	State New York ZIP Code + 4 11779
5. Position in labor organization.  BUSINESS AGENT	
•	
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	ise or minor child directly or indirectly had any of the following interests sions set forth in the instructions):
A. Held an interest in, engaged in transactions (including loans) with, or omentary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Rendered in colori com um lesson quam que se y se para portigia manera porteción de alter de six bioxes entirendo.	7.b. Amount.
Street	
City	
State ZIP Code + 4	
Sign	ature
15. Signature and verification. The undersigned declares, under penalty of I submitted in this report (including the information contained in any accompany) undersigned's knowledge and belief, true, correct, and complete. (See the second contained in the information of the including the information of the informa	ng documents), has been examined by the signatory and is, to the best of the
Signed Lany Gradoffle	On 8/12/85 516-867-2484  Date Telephone Number

Name of Person Filing DANNY GRODOTZKE	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary variabstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or included ing with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name PLUMBERS LOCAL UNION NO. 200	(mm)	
Trade Name, if any: APPRENTICE TRAINING FUND	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust c. Employer	
Street 1 AMES COURT SUITE 210	3	
City PLAINVIEW		
State New York ZIP Code + 4 11803		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Collectively bargained fund	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing.	\$0
City	12.a. Nature of interest held or income received.	<u> </u>
State New York ZIP Code + 4	APPRENTICE GRADUATION DINNER held	on 6/12/2004
	12.b. Amount.	\$130
		European Company Compa
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		microscope and an analysis of the second sec
Trade Name, if any:		mendang opposite ser
P.O. Box, Bldg., Room No., if any		Account of the second of the s
Street		edemino Selectore
City	- Automotive of the Control of the C	A vitalization of the final control of the final co
State ZIP Code + 4		POTENTIAL PROPERTY OF THE PROP
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	**************************************

Name of Person Filing	DANNY GRODOTZKE	File Number U-

8. Name and address of Business (Including trade name, if any).  Name PLUMBERS LOCAL UNION NO. 200  Trade Name, if any: PENSION FUND  P.O. Box, Bldg., Room No., if any  Street 1 AMES COURT SUITE 210	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
City PLAINVIEW		
State New York ZIP Code + 4 11803		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	Collectively bargained fund	
State New York ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
•	REIMBURSEMENT OF EXPENSES FOR ATTE CONFERENCE: 2001 PORTFOLIO CONCEP CONFERENCE 10/4-7 2004	
	12.b. Amount.	\$593

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Name of Person Filing DANNY	GRODOTZKE	File Number <b>U-</b>	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name PLUMBERS LOCAL UNION NO. 200	a. Labor Organization	
Trade Name, if any: APPRENTICE TRAINING FUND	a. Labor Organization	
	b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street 1 AMES COURT SUITE 210	J. Employer	
City PLAINVIEW		
State New York ZIP Code + 4 11803		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Collectively bargained fund	And Control of the Co
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State New York ZIP Code + 4	11 h Approximate dellawalus of such dealing	
NEW LOIA	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.	
	REIMBURSEMENT OF EXPENSES FOR ATTE	MDANCE AT
	TRAINING CONFERENCE - NAPT	NDANCE AT
	Table Control of the	
	12.b. Amount.	\$1,591

Name of Person Filing DANNY GRODOTZKE	File Number <b>U-</b>	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Plumbing Contractors Assoc. of Long Island	a. Labor Organization	
Trade Name, if any:	personnia	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 16 Lucinda Drive	c. Employer	
City Babylon		
State New York ZIP Code + 4 11702		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	9
Name	Business Association	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		•
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	
	Luncheon associated with education on 6/10/2004	al seminar held
		St
		orangement) (income
	12.b. Amount.	\$26

Name of Person Filing DANNY GRODOT:	ZKE	File Number <b>U-</b>

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Plumbing Contractors Assoc. of Long Island  Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 16 Lucinda Drive	c. Employer	
City Babylon		
State New York ZIP Code + 4 11702		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Business association	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	TOTAL CONTROL
	Golf outing held on 7/7/2004	
		- very very very very very very very very
		oral provides
		S-A-MATICONAL A
		the of the second
	12.b. Amount.	\$145

Form LM-30 (2003) Page 6 of 10

Name of Person Filing DANNY GRODOTZKE	File Number U-	
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Plumbing Contractors Assoc. of Long Island	a. Labor Organization	
Trade Name, if any:	23	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 16 Lucinda Drive	c. Employer	
City Babylon		
State New York ZIP Code + 4 11702		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Business Association	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		Additional and the second seco
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	The state of the s
	Business dinner held on 6/10/2004	
	12.b. Amount.	\$62

Form LM-30 (2003) Page 7 of 10

			<del></del>
Name of Person Filing	DANNY GRODOTZKE	File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Plumbing Contractors Assoc. of Long Island  Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	D. Trust	
Street 16 Lucinda Drive	c. Employer	
City Babylon		
State New York ZIP Code + 4 11702		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Plumbers Local Union No. 200	Collectively bargained fund	**************************************
Trade Name, if any: Apprentice Training Fund		
P.O. Box, Bldg., Room No., if any		
Street 1 Ames Court, suite 201		entitle de la companya de la company
City Plainview		
State New York ZIP Code + 4 11803	11.b. Approximate dollar value of such dealing.	\$0
	12.a. Nature of interest held or income received.	The state of the s
	Business dinner held on 6/29/2004	
	12.b. Amount.	\$124

Name of Person Filing DANNY GRODOTZK	E	File Number <b>U-</b>

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (include Name Plumbing Contractors Address of Business (include Name Plumbing Contractors Address Name Name Plumbing Contractors Address Name Name Plumbing Contractors Address Name Name Name Name Name Name Name Name		9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or em		11.a. Nature of such dealing.	<del></del>
Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City		Business Association	
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0
		12.a. Nature of interest held or income received.	Company The Company of the Company o
		Christmas dinner held on 12/10/200	4
		12.b. Amount,	\$193

Form LM-30 (2003) Page 9 of 10

Name of Person Filing DANNY GRODOTZKE	File Number <b>U-</b>

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Carret Capital, LLC  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 600 Old Country Road  City Garden City  State New York  ZIP Code + 4 11530	a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Plumbers Local Union No. 200  Trade Name, if any: Pension and Welfare Funds  P.O. Box, Bldg., Room No., if any  Street 1 Ames Court, suite 201  City Plainview  State New York ZIP Code + 4 11803	Investment Manager  11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.  Business Luncheon	
	12.b. Amount.	\$30

Form LM-30 (2003) Page 10 of 10